Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 09/697419													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							RA	RATE FEE		1	RATE	FEE	
FOR			NUMBER SILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	Basic Fee	710.00	
TOTAL CHARGEABLE CLAIMS					•		X\$	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		•		X4	X40=		OR	X80≈		
MULTIPLE DEPENDENT CLAIM PRESENT							+13	 5=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT	AL		OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER	THAN	
	, <u> </u>	SMA	LLI	ENTITY	OR	SMALL	NTITY						
AMENDMENT A	Â	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAIO	BER DUSLY	PRESENT EXTRA	RA	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 3	Minus	··2	0	=	X\$	9=		OR	X\$18=		
	Independent	. 3	Minus	***	3_	2	X40)=		OR	X80≈		
	FIRST PRESE	NTATION OF MI	JETIPLE DEP	ENDEN	CLAIM	لسلطس	+13	5=		OR	+270=		
								TAL		OR	TOTAL ADDIT, FEE		
	(Column 1) (Column 2) (Column 3)								·		AUDII. PEEI		
AMENDMENT B	B	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST IBER OUSLY	PRESENT EXTRA	RA	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 8	Minus	·à	$\frac{1}{2}$	= /-	X\$)= -		OR	X\$18=		
	Independent	NTATION OF MI	Minus	ENDEN	CLAIM		X40)=		OR	X80≃	1720	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								5=		OR	+270=		
	TOTA ADDIT. FEI									OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu		(Column 3)	ı						
AMENDMENT C	·- ()	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 8	Minus	2	20	=	XS :)=		OR	X\$18=	ì	
	Independent	VITATION OF M	Minus	***	5		X40	=		OR	X80=		
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +139									OR	+270≈		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." AODIT. FEE										C D	TOTAL ADDIT. FEE		
	If the "Highest Nu	mber Previously Pa ber Previously Pa	aid For" IN THE	S SPACE	is less tha	an 3, enter "3."	יייים מא		propriate box			·	

Application or Docket Number